

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) SCH-1815-C01								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">In re Application of Gerhard SIEMEISTER et al.</td> </tr> <tr> <td style="width: 60%; padding: 2px;">Application Number 10/796,174</td> <td style="padding: 2px;">Filed MARCH 10, 2004</td> </tr> <tr> <td colspan="2" style="padding: 2px; text-align: center;">COMBINATIONS AND COMPOSITIONS WHICH INTERFERE WITH VEGF/ VEGF AND ANGIOPOIETIN/ TIE RECEPTOR FUNCTION For AND THEIR USE (II)</td> </tr> <tr> <td style="padding: 2px;">Group Art Unit 1614</td> <td style="padding: 2px;">Examiner HUGHES, Alicia R PhD</td> </tr> </table>			In re Application of Gerhard SIEMEISTER et al.		Application Number 10/796,174	Filed MARCH 10, 2004	COMBINATIONS AND COMPOSITIONS WHICH INTERFERE WITH VEGF/ VEGF AND ANGIOPOIETIN/ TIE RECEPTOR FUNCTION For AND THEIR USE (II)		Group Art Unit 1614	Examiner HUGHES, Alicia R PhD
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) </div> <div style="width: 25%; text-align: right;"> \$_____ \$_____ <u>\$1050.00</u> \$_____ \$_____ </div> </div> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>510.00</u>.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card via EFS.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; text-align: center;"> <u>March 20, 2008</u> Date </div> <div style="width: 45%; text-align: center;"> <u>/Richard J. Traverso/</u> Signature <u>Richard J. Traverso, Reg. No. 30,595</u> Typed or printed name </div> </div>										
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p>										